SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT



20-0058 Permit #: Date: **Amount Paid:** Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

Bayfield Co. Zoning Dept.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. FILL OU									TININK (NO PENCIL)							
TYPE OF PERMIT REQUESTED →																
Owner's Name:					Mailing Address: City/State/2								Telephone:			
Steve & Tomi Backlund Address of Property:					4818 N. Prospect Rd Peoria Helofits, I.						26666 Cell Phone:					
44295 Namakagon Sunset Rd					Colde 1.1T 54821						309-472-8210			172-8210		
Contractor: Ridgeback Builders Tom Letke					1000000	Contractor Phone: Plumber: 406-451-7468						Plumber Phone:				
Authorized Agent: (F	Person Sign	ning Appli	cation on behalf	f of Owner(s))		751-7466 t Phone:	Age	ent Mailing Ac	ddress (in	clude City/State	e/Zip): Written Authorization			Authorization		
My T L						and the second						Attached Attached A Yes No				
PROJECT LOCATION	ROJECT Legal Description: (Use Tay Statement)						73945						Recorded Document: (Showing Ownership) 2019 R 578712			
1/4,	1	1/4	Gov't Lot	Lot(s)	CSM	Vol & Page	CSM D	oc# Lot(s) No.	Block(s) No.	Subd	ivision:				
Section	, Tow	nship _	43 N, R	ange <u>5</u> v	N	Town of:	naka	901			Lot S	ize	Acrea	ge 15		
	□ le I	Property	/Land within	200 foot of Piv	or Stro					f		Is your P	von out.			
V 61 1 1	Creel	☐ Is Property/Land within 300 feet of Riv Creek or Landward side of Floodplain?				escontinue –	2	Distance Structure is from Shorelin			feet in Flo		dplain	Are Wetlands Present?		
X Shoreland	☐ Is F	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage ☐ Distance Structure is from Shoreling								re: Yes		¥Yes □ No				
☐ Non-Shoreland					1	- January			_ =		icet		lo			
		Je ji njiyesii		(m. m. m	TIÝ HALVANSKI											
Value at Time of Completion								Total # of		W	nat Typ	oe of		Type of		
* include		Proje	ct	# of Stories		Foundation		bedrooms on	Sewer/S		Sanitary System			Water		
donated time & material								property		Is on	the pro	operty?		property		
	☐ New Construction		1-Story				□ 1		Municipal/City				☐ City			
\$ 35 000	★ Addition/Alteration Conversion			☐ 1-Story +	conj _ con connactio			□ 2	☐ (New) Sanitary Specify Type:				14.00	/ Well		
25,000			xisting bldg)	2-Story	cory 📡 Slab			3	□ Privy (Pit) or □ Vaulted (min 200 gallon)				<u></u>			
_	The state of the s		a Business on		Use			None Portable (w/serv						,,,,,		
Property						☐ Year Round		☐ Compost Toilet			t					
								00	L No	one						
Existing Structure Proposed Constru		rmit beir	ng applied fo	r is relevant to it	t)	Length:	45		Width				ght:	29		
Proposed Constit	uction.					Length:	10		Width	10		Hei	ght:	10		
Proposed Us	e	1				Proposed Stru	ucture				D	imension	S	Square Footage		
			Principal Structure (first structure on property)							(Х)				
*			Residence (i.e. cabin, hunting shack, etc.) with Loft								(X)			
X Residential Use			with a Porch								(Х)			
v v			with (2 nd) Porch								(Х)			
			with a Deck							(Х)				
				with (2 nd) Deck with Attached Garage								X)			
			Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)								(X	- 1-			
			Mobile Home (manufactured date)									Х)			
□ B4	¥	Addition/Alteration (explain) Accessory Building (explain)									× €	3)	160			
☐ Municipal Use			Accessory Building (explain)									Х)			
1			Accessory Building Addition/Alteration (explain)									Х)			
☐ Special Use: (explain)								(Х)						
Conditional Use: (explain)							(Х)							
Other: (explain)						(Х)								
A production and			FAILURE TO	OBTAIN A PERMIT	or STAR	TING CONSTRUCTI	ION WIT	HOUT A PERMI	IT WILL RE	SULT IN PENALT	IES	-				
I (we) declare that this ap (are) responsible for the result of Bayfield County property at any reasonab	detail and a relying on	ccuracy of this inform	all information I nation I (we) am	(we) am (are) providi	ng and tha	at it will be relied upo	on by Bay	field County in de	termining	whether to issue a	permit 1/	wal further ac	cont linbility	, which may be a		

(If there are Multiple Owners listed on the Deed All Owners must

Authorized Agent:

(If you are signing on behalf of the owner(s) Authorized Agent: Date 3-6-2020 Address to send permit 41895 Cable Sunset Ra,
Ridgeback Builders Attach
Copy of Tax Statement V

must sign or letter(s) of authorization must accompany this application)

If you recently purchased the property send your Recorded Deed

KELDER + DOTE SAMD 3-24-2020

r Sketch your Property (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

show Location of: Show / Indicate:

Proposed Construction

Show Location of (*):

North (N) on Plot Plan

(*) Driveway and (*) Frontage Road (Name Frontage Road)

Show: All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show:

Show any (*): (6) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20%

See attachment

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement			Description	Measurement		
Namakagon Sunset Rd			ji ke		26		
Setback from the Centerline of Platted Road	3501	Feet		Setback from the Lake (ordinary high-water mark)	-80	Feet	
Setback from the Established Right-of-Way	320+	Feet		Setback from the River, Stream, Creek	NH	Feet	
				Setback from the Bank or Bluff	NA	Feet	
Setback from the North Lot Line	1000+	Feet					
Setback from the South Lot Line	140+	Feet		Setback from Wetland	70+	Feet	
Setback from the West Lot Line Lake	NA	Feet		20% Slope Area on the property	X Yes □	No	
Setback from the East Lot Line Row	NA	Feet		Elevation of Floodplain		Feet	
	4.0						
Setback to Septic Tank or Holding Tank		Feet		Setback to Well	TBN-	Feet	
Setback to Drain Field Mound	100±	Feet					
Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet	NH	Feet			- 4		

usly surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

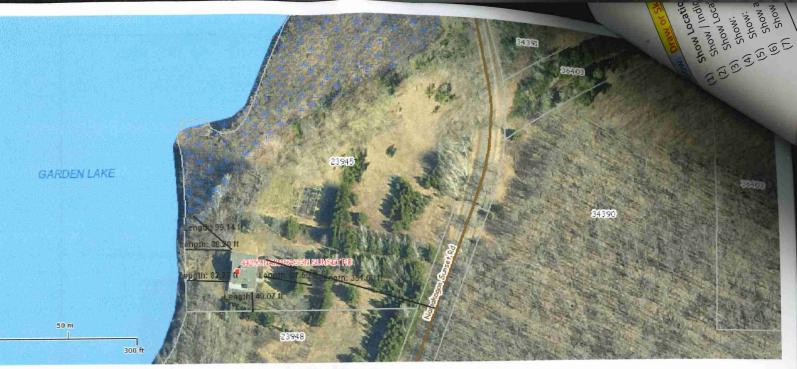
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (Cour	ntv Use Onlv)	Sanitary Number:		# of bedrooms:	Sanitary Date:						
Permit Denied (Date):		Reason for Denial:									
Permit #: 20 - 0058		Permit Date: 3-31-2020									
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	☐ Yes (Deed of Reco ☐ Yes (Fused/Contig ☐ Yes	uous Lot(s)) 🗹 No	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached						
Granted by Variance (B.O.A.) ☐ Yes ☐ No Ca	ase #:		Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:								
Was Parcel Legally Cr Was Proposed Building Site Delir			Were Property Lines Represented by Owner Was Property Surveyed U Yes U Yes								
Inspection Record: Hause Be Confirmed 4 Bed	Zoning District (R - () Lakes Classification (/)										
Date of Inspection: 3/2	0/20	Inspected by:	AR		Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Attached? Yes No – (If No they need to be attached.) Get required WDC permits Signature of Inspector: Date of Approval: 2/20/26											
Hold For Sanitary:	Hold For TBA:	Hold For Affi	davit: 🗆	Hold For Fees:							



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vn, City, Village, State or Federal mits May Also Be Required

AND USE - X
SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

20-0058 Steve & Tomi Backlund / Mike Furtak, Agent Issued To: No. Location: Section **Township** Range 5 W. Namkagon Town of N of a Line in Gov't Lot Lot **Block** Subdivision CSM#

For: Residential Addition / Alteration: [1- Story; Storage (10' x 18') = 180 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Get required UDC permits.

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NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

March 31, 2020

Date